

## Narragansett Parks & Recreation Facility Use Form

170 Clark Road Narragansett, RI 02882 401-782-0658

**Organization** (If applicable):

From the Parks and Recreation Department.  Event:  Dates:  Please give a brief description of your event (Please  Requested Facility(s) Big Sprague Tennis Building	nup. Facility requ	End Time:
From the Parks and Recreation Department.  Event:  Dates:  Please give a brief description of your event (Please  Requested Facility(s) Big Sprague Tennis Building	_Start Time:	Number of Participants: End Time:
Please give a brief description of your event (Please  Requested Facility(s)  Big Sprague  Tennis Building	_Start Time:	End Time:
Please give a brief description of your event (Please  Requested Facility(s)  Big Sprague Tennis Building		
Requested Facility(s) Big SpragueTennis Buildin	e attach further	documentation if needed):
Big SpragueTennis Buildin		
Big SpragueTennis Buildin		
	ng	
		Area(s) Requested
Clarke RoadChristofaro Pa	ark	Baseball FieldBasketball Court
Little SpragueGeorge CBoon StreetTown Beach		Lower Soccer FieldTennis Court
Eastwood LookOther		Upper Soccer FieldPlayground Area
Lights will be needed at the facility I am	requesting	
Lights will be needed at the latility rain	requesting	
th, personal injury, or property damage which I may have, stended to discharge in advance the Town of Narragansett of or connected with the use of said facility. It is understo is to be binding on my heirs, personal representatives, new vidual it is in agreement with all Narragansett Parks and Remitted on Town Property without a permit.  Note: Permit may I	, or which hereafte t, and all of its offic ood by my signatur ext of kin, spouse ar Recreation facility u be revoked at any	eby waive, release and discharge any and all claims for damages for accrue to me as a result of my use of the reserved facility. This reers, agents and employees from and against any and all liability are below that I have agreed that this waiver, release and assumptind assigns. The signature below indicates the requesting group or see procedures and the participation waiver. Drones or UAS are not given time by this department and all damages that may be incurred in connection with use of
e Due:		
gnature:		_ Date: _

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_